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|---|---|-----------------------------------|---|-----------------------------------|
| <b>SERIAL NUMBER</b><br>10/750,907  | <b>FILING OR 371(c) DATE</b><br>01/05/2004<br><b>RULE</b>   | <b>CLASS</b><br>704               | <b>GROUP ART UNIT</b><br>2626   | <b>ATTORNEY DOCKET NO.</b><br>003 |
| <b>APPLICANTS</b><br>Einat H. Nir, Rosh Ha'ayin, ISRAEL;  |   |                                   |   |                                   |
| <b>** CONTINUING DATA *****</b><br>This application is a CIP of 09/946,391 09/06/2001 PAT 6,704,699   |   |                                   |   |                                   |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                                   |   |                                   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br>** 04/08/2004   |   |                                   |   |                                   |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met<br>Verified and Acknowledged <i>[Signature]</i> Allowance<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>ISRAEL | <b>SHEETS DRAWING</b><br>42   | <b>TOTAL CLAIMS</b><br>20         |
|   |   |                                   |   | <b>INDEPENDENT CLAIMS</b><br>3    |
| <b>ADDRESS</b><br>AIR MAIL<br>EINAT H. NIR<br>20 Komemiut Street<br>Rosh Ha'ayin, 48039<br>ISRAEL   |   |                                   |   |                                   |
| <b>TITLE</b><br>In-context analysis and automatic translation   |   |                                   |   |                                   |
| <b>FILING FEE RECEIVED</b><br>385   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                   |